•	ompl te if Known	
FEE TRANSMITTAL	Application No.	09/016,159
SIPE	Filing Date	January 30, 1998
	First Named Inventor	Jong Y. Lee
JUL 0 7 2003 7	Group Art Unit	1647
	Examiner Name	Fozia M. Hamud
The state of the s	Atty. Docket Number	L535.12-0001
Total Amount of Payment \$42.00	FFF CALCU	U ATION (Constituted)
METHOD OF PAYMENT (Check One) 1. [X] The Commissioner is hereby authorized to charge any	3. ADDITIONAL FEES	ILATION (Continued)
additional fee required under 37 C.F.R. 1.16 and 1.17 and credit any over payments to Deposit Account No.11-0982. Deposit Account Name: Kinney & Lange, P.A. A duplicate copy of this communication is enclosed	Code (\$) Code (\$)	ee Description Fee paid
2. [X] Check Enclosed		<u> </u>
FEE CALCULATION	or	urcharge - late provisional filing fee
1. BASIC FILING FEE	·	
		or Filing a Request for Reexamination
Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description		xtension for reply within first month *
1001 750 2001 375 [] Utility Filing Fee		tension for reply within second month *
1006 330 2006 165 [] Design Filing Fee		tension for reply within third month
1004 750 2004 375 [] Reissue Filing Fee	<i>5</i> *	mension for reply within fourth month
1005 160 2005 80 [] Prov. Filing Fee		tension for reply within fifth month *
Subtotal (1) \$		ing a oner in support or an appear
2. EXTRA CLAIM FEES		equest for oral nearing
Number Prior** Extra Fee from Fee Paid Claims Below		erminal Disclaimer Fee
Total <u>14</u> - <u>20</u> = <u>0</u> x <u>0</u> = <u>0</u>		etition to revive - unavoidable
Indep. $\underline{5}$ - $\underline{4}$ = $\underline{1}$ x $\underline{42}$ = $\underline{42}$	·	etition to revive - unintentional
Multiple Dependent Claims <u>*</u> = <u>*</u>	1501 1,300 2501 650 Ut	ility/Reissue issue fee
**Insert 3 and 20, or number previously paid if greater; Reissue see below	1502 470 2502 235 De	esign issue fee
Large Entity Small Entity	1460 130 1460 130 Pe	etitions to the Commissioner *
Fee Fee Fee Description Code (\$) Code (\$)		etitions related to provisional applications
1202 18 2202 9 Claims in excess of 20		ubmission of Information Disclosure atement
1201 84 2201 42 Independent claims in excess of 3		ecording each patent assignment per
1203 280 2203 140 Multiple Dependent Claim	·	operty (times number of properties)
1204 84 2204 42 Reissue Independent Claims Over Original Patent		equest for Continued Examination
1205 18 2205 9 Reissue claims in excess of 20 and over original patent	Other fee (specify)	<u>*</u> Subtotal (3) \$
Subtotal (2) \$42.00		
Signature Peter Sawicki Date 7 2003		214
Date		